

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of BETTY HUNT and DEPARTMENT OF AGRICULTURE,
COTTON DIVISION, Memphis, TN

*Docket No. 01-1082; Submitted on the Record;
Issued December 11, 2001*

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
BRADLEY T. KNOTT

The issue is whether appellant has more than a five percent permanent impairment of the right middle finger.

On March 18, 1999 appellant, then a 52-year-old HVI machine operator, had her right middle finger caught in the grinding portion of the machine. In a March 22, 1999 report, Dr. Walter G. Efird, a Board-certified plastic surgeon, stated that appellant sustained an open wound on the ulnar side of the right middle finger. He treated the wound with debridement and a skin graft, measuring one centimeter by three centimeters.

The Office of Workers' Compensation Programs referred appellant to Dr. Carl Huff, a Board-certified orthopedic surgeon, to determine the extent of the permanent impairment of appellant's right middle finger and right hand. In a March 21, 2000 report, Dr. Huff stated that appellant had a well-healed skin graft area on the ulnar side of the right middle finger. He noted that the area of the skin graft had shrunk to an area of eight millimeters by two centimeters. He stated that the area of the skin graft had a smooth texture and manifested only a slightly increased pigmentation when compared to the surrounding area. He reported that the skin graft did not hinder the motion of the finger. He indicated that the immediate area of the skin graft had decreased sensation to pin prick, while the cutaneous sensation of the rest of the finger was normal. He stated that the range of motion of the metaphalangeal joint was 0 to 90 degrees, 0 to 100 degrees in the proximal interphalangeal joint, and 0 to 70 degrees in the distal interphalangeal joint. He found the pinch strength to be normal. He stated that appellant had reached maximum medical improvement as of March 2000.

In an April 14, 2000 memorandum, an Office medical adviser stated that appellant had a 20 percent permanent impairment of the finger for total transverse sensory loss which equaled a 4 percent permanent impairment of the hand. In an April 21, 2000 memorandum, a second Office medical adviser indicated that appellant had no permanent impairment due to loss of motion in the finger. He stated that appellant had a decreased sensation to pain in the area of the skin graft on the ulnar side of the finger. He estimated that the area of decreased sensation was

50 percent of the length of the finger which equaled a 5 percent permanent impairment of the finger or a 1 percent permanent impairment of the hand.

In a January 24, 2001 decision, the Office issued a schedule award for a five percent permanent impairment of the right middle finger.

The schedule award provision of the Federal Employees' Compensation Act¹ and its implementing regulation² set forth the number of weeks of compensation to be paid for permanent loss, or loss of use, of members or functions of the body listed in the schedule. However, neither the Act nor its regulations specify the manner in which the percentage loss of a member shall be determined. For consistent results and to ensure equal justice to all claimants, the Board has authorized the use of a single set of tables in evaluating schedule losses, so that there may be uniform standards applicable to all claimants seeking schedule awards. The American Medical Association, *Guides to the Evaluation of Permanent Impairment*³ has been adopted by the Office as a standard for evaluating schedule losses and the Board has concurred in such adoption.⁴

Dr. Huff indicated that appellant had decreased sensation in the area of the skin graft on the right middle finger. The first Office medical adviser stated that appellant had a total sensory loss in the ulnar side of the finger. However, this conclusion was a misinterpretation of Dr. Huff's report as the report only noted a decreased sensation in the area of the skin graft. The second Office medical adviser properly noted that appellant had a partial loss of sensation in the ulnar side of the finger which extended 50 percent of the length of the finger. He properly found that appellant therefore had a five percent permanent impairment of the finger due to the partial loss of sensation on the ulnar side of the middle finger.⁵ The second Office medical adviser properly noted that appellant had no permanent impairment due to the ranges of motion of the joints of the right middle finger.⁶ The medical evidence of record therefore shows that appellant has a five percent permanent impairment of the right middle finger.

¹ 5 U.S.C. § 8107(c).

² 20 C.F.R. § 10.304.

³ (4th ed. 1993).

⁴ *Thomas P. Gauthier*, 34 ECAB 1060, 1063 (1983).

⁵ A.M.A., *Guides*, p. 31, Table 9.

⁶ A.M.A., *Guides*, pp. 32-34, Figures 19, 21, 23.

The decision of the Office of Workers' Compensation Programs, dated January 24, 2001, is hereby affirmed.

Dated, Washington, DC
December 11, 2001

David S. Gerson
Member

Willie T.C. Thomas
Member

Bradley T. Knott
Alternate Member